

Year 2010

# Employee Benefits

ET Officers, Related Service Providers, and Teachers

<b>Introduction .....</b>	<b>3</b>
How to Enroll In Benefits .....	4
Health Benefit Coverage .....	6
Health Premium Rates for 12-Month Employees .....	10
Life Insurance.....	11
Supplemental Insurance Options.....	13
Flexible Spending Accounts .....	14
Additional Benefits .....	15
Retirement Options .....	16
Frequently Asked Questions .....	17
Points of Contact.....	21
Supporting Documentation Fax Cover Sheet .....	22

## Introduction to Benefits

### Welcome to DCPS!

In this Welcome Packet you'll find information to help you determine which benefits are available to you as a DCPS employee and detailed information regarding each benefit.

New Hire Orientation provides new employees with an introduction to the District of Columbia Public Schools (DCPS), a discussion of DCPS personnel policies, and information about employee benefits.

You will be able to enroll in benefits following your orientation, therefore the DCPS Office of Human Resources encourages all new employees to thoroughly review this benefits packet prior to orientation day, jot down questions to ask OHR Benefits representatives during orientation, and to bring supporting documentation with you on your first day.

**YOU MUST ENROLL IN HEALTH AND LIFE BENEFITS WITHIN 31 DAYS OF YOUR FIRST DAY OF EMPLOYMENT.**

#### TOP 3 ENROLLMENT QUESTIONS ANSWERED

**1. How do I enroll in benefits online?**

New employees can begin to make benefits selections online through Employee Self Service (ESS) following their first day of employment. You must have your ESS user id and password to access the online system. Please contact your school business manager or staffing specialist for instructions on how to access Employee Self Service.

**2. When does my life insurance coverage begin?**

Life insurance coverage begins on your first day of employment.

**3. When does my health insurance and additional optional benefits coverage begin?**

The effective date of coverage for health insurance and additional optional benefits is based on your online enrollment date. Note that it takes the insurance providers 30-45 days from the effective date of coverage to confirm enrollment. Wait until you receive enrollment cards to use your benefits for non-emergency services.

Online Enrollment Date	Effective Date of Coverage	1 <sup>st</sup> Deduction on Paycheck
February 14 – February 27	February 28	March 26
February 28 – March 13	March 14	April 9
March 14 – March 27	March 28	April 23

## How to Enroll in Benefits

### Fast and Easy Benefits Enrollment through PeopleSoft Employee Self-Service!

You can use PeopleSoft Employee Self Service (ESS) to enroll in benefits within your first 31 days of employment. In addition to benefits enrollment, ESS is the most convenient way to view, manage and update the following:

- View your paycheck prior to payday
- Benefits summary
- Beneficiaries, tax deductions and direct deposit information
- Personal Information (name change, marital status, mailing & tax address, email, phone number)

### How Do I Access Employee Self Service (ESS)?

#### STEP 1: Create your PeopleSoft Employee Self Service Account

You can quickly create your ESS account by visiting the registration website at <http://eprofile.asmp.in.dc.gov> and complete the steps for new registrants. Your username and password will be sent to the email address that you provide. (You must use a DC Government computer to create your account.)

#### STEP 2: Log onto the PeopleSoft Employee Self Service website: <http://ess.dc.gov>

Log onto PeopleSoft Employee Self Service (ESS) at <http://ess.dc.gov> Please note that you must first be registered and have your ESS user name and password.

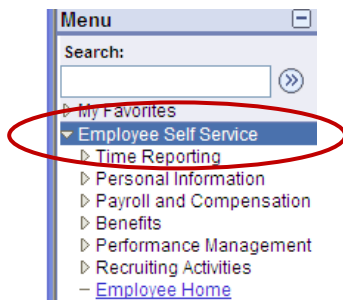
When you log into ESS for the first time, you will be required to reset your password. Your password must be 6-8 characters long and a combination of letters, numbers and/or symbols. You will also be asked for an email address. This is the email address your password will be emailed to if you forget it. We encourage you to use your DCPS email address for this purpose, however you may use any email address you would like.

**If you require technical assistance, please call the ASMP HelpDesk at 202-727-8700.**

## What Do I Need To Update In My Profile?

All employees must update their personal information, direct deposit information, tax withholdings and enroll in benefits. *Note, only benefits eligible employees will be able to access the benefits enrollment screen.*

**STEP 1:** From the Menu Toolbar, select **Employee Self Service**.



**STEP 2:** Update each section circled below: **Personal Information, Payroll & Compensation, & Benefits**.



## What Do I Update In Each Section?

Personal Information Summary	Payroll & Compensation Home	Benefits Information
<ul style="list-style-type: none"> <li>Add Contact Information</li> <li>Add Email Address</li> <li>Add Emergency Contacts</li> <li>Verify Personal Details</li> </ul>	<ul style="list-style-type: none"> <li>Add Direct Deposit Information</li> <li>Add W-2 Information</li> <li>Add State Tax Information (Select the state where you live)</li> </ul>	<ul style="list-style-type: none"> <li>Benefits Enrollment</li> </ul>

**Upon submission your benefits selections, you will receive a confirmation email from ESS. Please keep a copy for your records.**

## Health Benefit Coverage

### Who is eligible for the health benefit coverage?

District of Columbia Public Schools provides a comprehensive benefits plan to the following employees and their eligible dependents:

- All Full-Time Permanent Employees
- All Part-Time Permanent Employees who generally work at least 20 hours per week
- Employees with Temporary Full-Time appointments of at least 13 months

The chart below lists all dependents eligible for health insurance and the documentation required to enroll the dependent. You are required to provide social security numbers and dates of birth for all dependents over the age of 6 months.

DEPENDENT	REQUIRED DOCUMENTATION	PLAN TYPE
Legally Married Spouse	Marriage license	Both
Domestic Partner <ul style="list-style-type: none"> <li>- Common Law Spouse or</li> <li>- Same-Sex Partner</li> </ul>	Domestic Partnership Affidavit	District Plan Only
Unmarried Children <ul style="list-style-type: none"> <li>- Up to age 25</li> </ul>	Birth Certificate Age 19-25 proof of full-time enrollment at an accredited college or university	District Plan Only
Unmarried Children <ul style="list-style-type: none"> <li>- Up to age 22</li> </ul>	Birth Certificate	Federal Plan Only
Disabled Adult Children	Statement of permanent disability Child must have been disabled before age 22	Both

#### **Please Note:**

If you plan to enroll dependents, you must provide the supporting documentation as listed above to the Office of Human Resources within your 31-day new enrollment period. Please use the supporting documentation fax coversheet provided with this packet (page 22).

### Additional Details

**Health coverage does not begin on the first day of employment.** Coverage begins on the first day of the pay period following online enrollment. Health insurance cards are mailed by the provider approximately 4-6 weeks after the online application is processed.

The district carries the majority of the cost of benefits coverage with a supporting contribution from you. Your share is paid with pre-tax dollars deducted from each paycheck.

## Health Benefit Coverage

---

### 2010 Health Benefit Plan Options (District Employees Only)

DCPS offers the flexibility of selecting a HMO, POS, or PPO plan option for health insurance coverage. There are distinct differences between each option:

#### **Health Maintenance Organization (HMO)** - Aetna, Kaiser Permanente, United Health Care

- Requires you to select a primary care physician within plan network of providers (*United & Kaiser only*)
- Requires that you obtain a referral for specialist care (*Kaiser only*)
- Services rendered by out of network providers will not be considered as eligible expenses under the plan

#### **Open Choice (PPO)** – Aetna

- No primary care physician selection required, no referrals needed
- Provides both in and out of network benefits
- Only plan that provides nationwide coverage for non-emergency care

#### **Point of Service (POS)** – United Health Care

- Requires you to select primary care physician (PCP) for in-network related services
- Your PCP provides and coordinates your medical care (including referrals) with specialty providers
- Freedom to seek care outside of network, however, you are responsible for any applicable deductibles and non-preferred provider charges

**NOTE: All of the health care providers require employees to maintain a local address in PeopleSoft.**

#### **NEED MORE INFORMATION?**

For information regarding the health plans providers, copays, deductibles, etc. you may visit the DC Office of Human Resources website at: [www.dcps.dc.gov](http://www.dcps.dc.gov) and select Human Resources > 2010 Benefits Enrollment

Please visit the healthcare websites for additional information on plans, services covered, and participating providers.

Aetna	<a href="https://aetna-ekits.kittrak.com">https://aetna-ekits.kittrak.com</a>	Passcode: 785E91
Kaiser Permanente	<a href="http://www.kp.org">www.kp.org</a>	
United Health Care	<a href="http://www.myuhc.com">www.myuhc.com</a>	

#### **FEDERAL EMPLOYEES HEALTH BENEFITS (FEHB) INFORMATION**

Employees originally hired by the District Government prior to October 1, 1987 are eligible to receive health and life insurance benefits sponsored by the Federal Government. To obtain more information about these benefits, please contact the Benefits Unit.

## Washington Teachers Union

### Additional Benefits

#### Who is eligible for Washington Teachers Union (WTU) Benefits?

DCPS teachers and related-service-providers in positions coded ET-15 and EG-09 employees who render educational services. Please refer to your offer letter to confirm your eligibility or contact your staffing specialist. As a member of the WTU Collective Bargaining Unit, employees pay organizational dues directly to the union. All WTU employees are required to pay an agency fee of \$25.17 per pay period, which provides access to dental, optical, and legal benefits. For more information regarding union dues and coverage options, please contact the WTU at 202.293.8600.

#### Washington Teachers Union (WTU) Dental & Optical Benefits

The WTU sponsors a basic vision and dental plan for its members. To participate, there's no deduction made from your pay or union dues for basic dental and optical benefits. For additional dental coverage (Preferred Provider Option), for which you pay a premium rate, you must enroll during the 31 day period following your first day of employment or during the annual open enrollment season with the WTU.

#### Contacts for dental and optical benefits are provided below:

Washington Teachers Union		<ul style="list-style-type: none"> <li>▪ Teachers &amp; Service Providers</li> <li>▪ EG-09 Teachers</li> </ul>	202.293.8600
<b>Dental Plan</b>	United Dental	800.445.9090	<a href="https://www.myuhcdental.com">https://www.myuhcdental.com</a>
<b>Optical Plan</b>	United Optical	800.638.3120	<a href="https://ww2.myuhcvision.com/members/index.jsp">https://ww2.myuhcvision.com/members/index.jsp</a>

To participate in the dental and vision options, you must complete paper enrollment forms which are located at <http://www.wtulocal6.org/Benefits/>. Enrollments submitted through PeopleSoft will not be honored.

#### Washington Teachers Union (WTU) Sick Leave Bank

As a member of the WTU you are eligible to participate in the union sponsored Sick Leave Bank. To participate, you must enroll at the beginning of each school year between September 1 and September 30 or during WTU benefits open enrollment season (November 1 to November 30). Members of the Sick Leave Bank contribute eight (8) hours of leave per school year. For more information or to enroll, contact the WTU directly.

#### Sick Leave Accruals

ET-15 (10 Month): Twelve days of sick leave will be posted at the beginning of each school year for ten month teachers. Unused sick leave shall be carried forward from year to year.

ET-15 (12 Month): Fifteen days of sick leave will be posted at the beginning of each school year for twelve month teachers. Unused sick leave shall be carried forward from year to year.



## Council of School Officers

---

### Additional Benefits

#### **Who is eligible for Council of School Officers Benefits?**

DCPS employees in positions coded ET Officer 6-13 and EG Officer 11-14. Please refer to your offer letter to confirm your eligibility or contact your staffing specialist. As a member of the Council of School Officers Collective Bargaining Unit, employees pay organizational dues directly to the union.

#### **Council of School Officers Dental & Optical Benefits**

As a member of the Council of School Officers (CSO), you are entitled to dental and optical benefits provided by the union. The CSO offers two dental plan options called the Freedom-of-Choice PPO and the Freedom-of-Choice DMO through Aetna. Optical benefits are provided through United Healthcare Vision. For more information on the benefits plan and enrollment information for both dental and optical coverage, please call the CSO office at 202.526.4700.

#### **Council of School Officers Sick Leave Bank**

As a member of the Council of School Officers (CSO), you are eligible to join the CSO Sick Leave Bank – which grants you up to 60 days of sick leave a year for an extended illness. Each participating member contributes 8 hours (1 day) of sick leave each school year. For details and enrollment information, you may call the CSO office at 202.526.4700.

#### **Council of School Officers Annual & Sick Leave Accruals**

All Members of the CSO accrue four (4) hours of sick leave per pay period for a total of 13 days per calendar year.

Officers with less than 3 years of service accrue four (4) hours of annual leave per pay period for a total of 13 days per calendar year.

Upon completion of three years of service, officers accrue six (6) hours of annual leave per pay period for a total of 20 days per calendar year. Upon completion of fifteen years of service, officers accrue eight (8) hours of annual leave per pay period for a total of 26 days per calendar year.

**For detailed information regarding additional benefits provided by the Council of School Officers, please contact the union directly at 202.526.4700.**

## 12-Month Employees Health Benefit Plan Premium Rates

### DC Employees Health Benefits (Employees hired on or after 10/01/1987)

The premium rates listed below are for the 2010 Plan Year.

#### AETNA HEALTHCARE HMO

TYPE	ENROLLMENT CODE	2010 PREMIUM BI-WEEKLY	2010 PREMIUM MONTHLY
Self-Only	HM1	\$50.37	\$109.13
Family	HM2	\$130.95	\$283.72
Domestic Partner Self	HM3	\$50.37	\$109.13
Domestic Partner Family	HM4	\$130.95	\$283.72

#### AETNA QUALITY OPEN ACCESS PLAN PPO

TYPE	ENROLLMENT CODE	2010 PREMIUM BI-WEEKLY	2010 PREMIUM MONTHLY
Self-Only	AP1	\$69.00	\$149.50
Family	AP2	\$180.09	\$390.20
Domestic Partner Self	AP3	\$69.00	\$149.50
Domestic Partner Family	AP4	\$180.09	\$390.20

#### KAISER PERMANENTE HMO

TYPE	ENROLLMENT CODE	2010 PREMIUM BI-WEEKLY	2010 PREMIUM MONTHLY
Self-Only	KP1	\$45.10	\$97.72
Family	KP2	\$117.26	\$254.06
Domestic Partner Self	KP3	\$45.10	\$97.72
Domestic Partner Family	KP4	\$117.26	\$254.06

#### UNITED HEALTHCARE HMO

TYPE	ENROLLMENT CODE	2010 PREMIUM BI-WEEKLY	2010 PREMIUM MONTHLY
Self-Only	MD1	\$41.61	\$90.14
Family	MD2	\$107.93	\$233.86
Domestic Partner Self	MD3	\$41.61	\$90.14
Domestic Partner Family	MD4	\$107.93	\$233.86

#### UNITED HEALTHCARE POINT OF SERVICE (POS)

TYPE	ENROLLMENT CODE	2010 PREMIUM BI-WEEKLY	2010 PREMIUM MONTHLY
Self-Only	UP1	\$42.93	\$93.02
Family	UP2	\$111.37	\$241.30
Domestic Partner Self	UP3	\$42.93	\$93.02
Domestic Partner Family	UP4	\$111.37	\$241.30

## Life Insurance

---

**DCPS offers several life insurance options to eligible employees.**

### **Basic Life Insurance**

Coverage begins on Day 1 of employment and you are automatically enrolled in the benefit **unless you decline** coverage. Basic life insurance is equal to 1x your annual salary (rounded up to the nearest \$1,000) plus \$2,000.

### **Supplemental Life Insurance**

To enroll in supplemental options, you must be enrolled in the basic life insurance option. Rates are based on age and salary.

#### **Standard - Option A**

Additional \$10,000 worth of insurance coverage

#### **Additional – Option B**

Additional coverage equivalent to one up to five times your annual salary

#### **Family – Option C**

\$5,000 life insurance for eligible spouse

\$2,500 for each eligible dependent child

### **Accidental Death and Dismemberment Insurance (AD&D)**

Additional benefit provided at no cost to employee. Coverage is equal to 1x annual salary plus \$2,000. Full benefit is available until age 35. Beginning on employee's 36<sup>th</sup> birthday, AD&D coverage decreases by 10% each year until age 45. At age 45, AD&D is no longer available to employee.

## Life Insurance

### 2009 DCEGLI LIFE INSURANCE PREMIUM RATES

Rates listed below are for the DC Life Insurance plans which are available for all benefits eligible employees hired on or after 10/01/1987. Actual bi-weekly rates are automatically calculated when enrolling through PeopleSoft Employee Self Service.

#### Basic – Annual Salary + \$2,000

##### Basic Coverage – Biweekly Rates

\$0.090 per \$1,000 of coverage

\$0.063 per \$1,000 is employee's share

\$0.027 per \$1,000 is District's share

##### Sample Bi Weekly Cost

Annual Salary: \$39,452

$40,000 + 2,000 = 42,000 \times (\$0.063/1000) = \$2.65$

#### Option A – Standard \$10,000 coverage

AGE	BI-WEEKLY PREMIUM RATE
Under 35	\$0.352
35 - 39	\$0.440
40 - 44	\$0.704
45 - 49	\$1.144
50 - 54	\$1.936
55 - 59	\$3.960
60+	\$6.160

##### Sample Bi Weekly Cost

Annual Salary: \$39,452      Age: 41

Round salary to nearest \$1,000

Divide salary by 10,000 and multiply by age group

$(\$40,000/10,000) \times 0.704 = \$2.82$

#### Option B – Additional Coverage 1 to 5 Times Annual Salary

Bi-weekly premium per \$1,000 of coverage

AGE	BI-WEEKLY PREMIUM RATE
Under 35	\$0.035
35 - 39	\$0.044
40 - 44	\$0.070
45 - 49	\$0.114
50 - 54	\$0.194
55 - 59	\$0.396
60+	\$0.748

##### Sample Bi Weekly Cost

Annual Salary: \$39,452      Age: 41

Election: 5 times salary

Round salary to nearest \$1,000

Divide age category rate by 1,000, then multiply number of times you want to elect and salary

$(0.070/1000) \times 5 \times \$40,000 = \$14.00$

#### Option C – Family Coverage

Bi-weekly premium for family unit

AGE	BI-WEEKLY PREMIUM RATE
Under 35	\$0.26
35 - 39	\$0.27
40 - 44	\$0.46
45 - 49	\$0.62
50 - 54	\$0.97
55 - 59	\$1.54
60+	\$2.46

##### Sample Bi Weekly Cost

Flat Rate Payment

Age: 41 = **\$0.46**

## Supplemental Insurance Options

---

**Supplemental Insurance plans provide security, peace of mind, and satisfaction in knowing that you have taken a step toward securing your income during a period of disability. Plans offered to DCPS employees include:**

### **SHORT TERM DISABILITY COVERAGE**

Short Term Disability (STD) is designed to pay a weekly benefit to you in the event you cannot work due to a covered illness or injury. This benefit replaces a portion of your income, thus helping you to meet your financial commitments in a time of need. Short Term Disability may be used in conjunction with annual or sick leave.

### **LONG TERM DISABILITY COVERAGE**

Long Term Disability (LTD) insurance is designed to pay a weekly benefit to you in the event you cannot work due to a covered illness or injury. The coverage can help with the every day bills, such as the mortgage or rent, that continue even when you can't work. LTD may be used in conjunction with annual or sick leave. The maximum monthly benefit is equal to \$7,500 (depending upon annual salary), worldwide coverage provided, and waiver of premiums while disabled. If you become disabled before age 62, LTD benefits may continue during disability until you reach age 65.

### **AFLAC INDEMNITY PLAN**

AFLAC offers a distinct type of protection. Unlike major medical health insurance, we pay you (unless otherwise assigned) not the doctor or hospital. AFLAC does not replace medical insurance it is an additional benefit that provides cash benefits and allows you to spend them as you like to help with financial challenges an accident or illness could have to your standard of living. Types of medical issues covered:

- Cancer/Specified-Disease
- Hospital Confinement Sickness Indemnity
- Hospital Confinement Indemnity
- Specified Health Event

For more information, visit [www.aflacclients.com/dcgov/Welcome.aspx](http://www.aflacclients.com/dcgov/Welcome.aspx) or contact the AFLAC Customer Service Line at (202) 379-4755.

**NOTE:** *You are required to meet with an AFLAC Customer Care Representative to complete the enrollment process. If you do not meet with an AFLAC representative, the elections made through PeopleSoft will not be honored and all AFLAC deductions will be returned to you as taxable income.*

## Flexible Spending Accounts

---

DCPS offers all benefits-eligible employees two pre-tax benefits: Health Care Flexible Spending and Dependent Care Flexible Spending Accounts. These pre-tax accounts allow you to pay your work-related daycare expenses, out-of-pocket medical, dental and vision expenses on a pretax basis. An FSA can only be added during open enrollment; however with a life change/event, an FSA can be added or canceled.

### Important Information

- FSAs are on a calendar year plan January 1 through December 31, be sure to estimate your expected out-of-pocket expenses carefully
- If you do not use all of the money that you deposit into your spending account(s) by December 31 of the plan year, the money will be forfeited according to IRS regulations. All receipts for plan year expenses must be submitted by March 31 of the next calendar year.
- **FSAs do not roll-over annually.** You must enroll each year during the open enrollment period.
- For a complete list of eligible expenses visit [www.payflex.com](http://www.payflex.com).

### Benefits of a Flexible Spending Account

- Your Flexible Spending Account (FSA) can help reduce your taxes and increase take-home pay.
- On average, people save 23% in taxes, by paying their out-of-pocket health care and child care expenses on a pretax basis through an FSA. Actual tax savings depends on several variables, including state and local tax rates and the tax bracket of the participant:
  - 15% tax bracket can save up to 22.65%
  - 27% tax bracket can save up to 34.65%
- Financial planners and tax advisors advocate participation in an FSA.

### Healthcare Flexible Spending Account

- Employees can set aside up to \$3,000 annually for eligible health expenses.
- Eligible expenses include:
  - Medical, dental, and vision expenses not reimbursed by any plan - such as copayments and deductibles
  - Vision care and expenses such as exams, eyeglasses, and contact lenses
  - Over the counter medications (ie. antacids, allergy medicines, pain relievers)

### Dependent Care Flexible Spending Account

- Employees can set aside up to \$5,000 (single parent or married and filing taxes jointly) or \$2,500 per person if married and filing taxes separately.
- If married; spouse must be working, searching for a job, in school and enrolled as a full-time student for at least five months of the year or mentally and/or physically unable to provide care for a dependent for your day care expenses to qualify for reimbursement.
- Eligible dependents include:
  - Dependents under age 13 who can be claimed as exemptions on your federal income tax form.
  - Dependents of any age (including parents who are mentally or physically incapable of self-care and who live regularly in your household at least eight hours per day).

## Additional Benefits

---

### Additional Benefits Offered to DC Public Schools Employees

#### **COMMUTER BENEFITS TRANSIT PLAN**

All employees may use the Commuter Benefits Transit Plan which is a pre-tax benefit that is used to pay for your monthly bus, train or metro passes. Contributions to your Transit Plan account are made before any taxes (payroll or income) are taken from your earnings.

- You decide to have an amount of your choice deducted from your paycheck, up to the IRS monthly maximum (\$230 per plan).
- Expenses must be incurred when commuting between work and an employee's residence.
- Opportunity to pay for these expenses with earnings that have not been taxed

#### **COMMUTER PARKING EXPENSES PLAN**

Eligible parking expenses include:

- Parking provided to an employee on or near the business premises of the employer
- Location from which the employee commutes to the place of employment including commuting by carpool, commuter highway vehicle or mass transit facilities.
- Location where the employer pays the expense directly to the parking lot provider or reimburses the employee
- Location where an employer provides parking on premises it owns or leases

For more information visit the ADP website at [www.flexdirect.adp.com](http://www.flexdirect.adp.com)

#### **EMPLOYEE ASSISTANCE PROGRAM**

All employees may use the Employee Assistance program, which provides confidential counseling and referral services for emotional, professional or financial problems. This confidential counseling program is staffed by non-government agency professionals through Cope, Inc.

For more information, call 202.628.5240 or 800.841.7406 or visit the website at [www.cope-inc.com](http://www.cope-inc.com).

#### **SAVINGS BOND PROGRAM**

Any full or part-time salaried employee may purchase US Savings Bonds through payroll deduction. Visit the Treasury Direct website at <http://www.nbtco.com/> for more information.

#### **WASHINGTON SPORTS CLUB (WSC) DISCOUNT**

DC Government has established a corporate membership rate through the Sports Clubs Network of health clubs. You may join the club and begin using the facilities immediately following the completion of the online enrollment application. A 1-Year Passport Membership provides access to any Sports Club location at any time and costs \$49.00 per month with at \$29.00 initiation fee. To enroll, visit [www.companiesgetfit.com](http://www.companiesgetfit.com) or contact Nancy Stitt – Account Manager at 917.351.6680 ext. 1541 or via email at [Nancy.Stitt@Town-Sports.com](mailto:Nancy.Stitt@Town-Sports.com).

## Retirement Options

---

DCPS provides several different retirement plan options to eligible employees. Plan participation is based on your position classification and your original date of employment with the District Government.

### Teacher's Retirement Plan

An automatic defined benefit for all employees classified as ET 1 through 15.

ET-15 employees contribute 8% of salary on a pre-tax basis, are vested after five years of service, and do not pay into social security. ET Employees who are members of the CSO union contribute 8% of salary on a post-tax basis, are vested after five years of service, and do not pay into social security.

Upon retirement from DCPS, employees receive a monthly annuity if they meet the age and service requirements. You are eligible to retire from DCPS if you meet the following criteria:

- Age 55 with 30 years of service;
- Age 60 with 20 years of service;
- Age 62 with 5 years of service.

Complete details on the plan provisions are in your Teacher's Retirement Plan Summary Plan Description or visit the DC Retirement Board's website at [www.dcrb.dc.gov](http://www.dcrb.dc.gov) for more plan information.

### 403(b) Tax Sheltered Annuity

Optional retirement savings program that provides employees the opportunity to make pretax contributions to a tax sheltered annuity (TSA). Eligible employees may defer up to \$15,500 annually for the year 2010. Eligible employees over age 50, may contribute an additional \$5000 into a TSA. No taxes are paid on the contributions or earnings until the employee withdraws the funds.

*To enroll in a 403(b) Tax Shelter Annuity, you must first contact the vendor of your choice and complete their paper enrollment form. Elections made through PeopleSoft will not be honored and your money will be returned to you as taxable income.*

### 457 Deferred Compensation Plan

All benefits eligible DCPS employees may participate in the 457 Deferred Compensation Plan which is managed by ING. The 457 reduces the amount of taxable income per pay period based on the employee's contribution. This is an optional savings program that allows employees to tax-defer income and invest for the future. The Internal Revenue Service (IRS) determines the maximum annual amount that can be deferred. For plan year 2010, employees may defer up to \$15,500. Employees may be eligible for increased annual contributions under a special 457 catch-up provision during the three years prior to the year an employee reaches normal retirement age or, if they reach age 50 or older before the end of the calendar year.

*To enroll in the 457 Deferred Compensation Plan you must complete a paper enrollment form with ING. To obtain a copy of the enrollment form, please call ING at 800.584.6001. Enrollment selections made through PeopleSoft without a paper enrollment form will not be honored and the money will be deducted and held in escrow. Following the escrow waiting period, the funds will be returned to you and taxed as income.*



## Retirement Options

### 2010 APPROVED 403(b) TAX SHELTER ANNUITY VENDORS FOR DCPS EMPLOYEES

To enroll in a 403(b) Tax Shelter Annuity you must complete a paper enrollment form with the vendor of your choice. To obtain a copy of the enrollment form, please contact the vendor as shown below.

If you enroll through PeopleSoft, your selection will not be honored unless you complete the paper application form provided by the vendor. The money will be deducted from your paycheck and held in escrow. Following the escrow waiting period, the funds will be returned to you and taxed as income.

Name of Company	Plan Type	Contact Person	Contact Phone Number
<b>AXA Equitable</b>	403(b)	John Anderson Lorna Chandlee James C. Farally Will Southwood Mark Toia Lakeisha Wilson	202.577.1577 Cell 703.205.0386 410.309.3660 443.306.6698 703.205.0346 Office/ 323.841.2007 Cell 703.205.0340 Office/ 302.507.5050 Cell
<b>Commonwealth (The Felder Group)</b>	403(b) (7) Mutual Fund	Demetrius Felder	301.638.9407 or 301.984.4428
<b>ING Financial</b>	403(b)	Donald Byrd Bruce Rome Keith Serrano Larry Webber	202.829.4415/ 301.257.9529 Cell 703.449.2916 301.292.2423/ 240.605.6917 Cell 703.449.2900
<b>Lincoln Financial</b>	403(b)	Nancy Hendershot Ray Stanley Bobby Watson, Sr. Bobby Watson, Jr.	All representatives can be reached on: 301.987.7211 or 800.242.1421
<b>MetLife (Travelers)</b>	403(b)	Richard Carter Al Clark Berhanne Kassahum Edward Martin	800.513.7785/ 202.368.3429 Cell 301.474.0801 Ext. 31 443.285.0955 or 800.446.1615 443.886.2721/ 347.244.0538 Cell
<b>New York Life</b>	403(b)	Nigel Black Clyde Blassengale, Sr. Darryl Marshall Allen Randle Glenn Scott	410.627.8381 202.957.3971 Cell 301.581.4142 Office 301.214.6600 301.214.6600
<b>Valic</b>	403(b)	Danielle Byrd Jillian Isabelle Andrew Jerdal Mark Maggio	313.530.3492 Cell 410.424.1838 or 800.448.1838 800.892.5558 Ext. 88860 800.892.5558 Ext. 88424

## Frequently Asked Questions

---

### Health Insurance

**Q. Does my health insurance cover all of my family members including my parents and grandchildren?**

A. No, health insurance is solely reserved for you, your spouse and eligible dependents under the age of 22.

**Q. Can I enroll my eligible dependent from another country who does not have a social security number yet?**

A. Yes, you have 31 days from their date of arrival to add them to your plan. You must provide a copy of the dependent's visa.

**Q. How long will it take for me to receive my health card?**

A. Approximately 4-6 weeks from the effective date of your enrollment.

**Q. If I do not see deductions for insurance options on my paycheck, should I assume that I am covered for the benefit(s)?**

A. No. If you do not see a deduction on your paycheck on the expected deduction begin date, there may be an issue with your enrollment and you should not use the service. Contact your employee services specialist immediately to confirm your enrollment coverage. If you decide to use the service, without making a payment through payroll deductions, you will be charged for the entire cost of the service.

**Q. Is dental and optical coverage included with my health coverage?**

A. Yes, each of the health insurance plans includes a dental and optical discount. The dental and optical discounts have no impact on the comprehensive dental and optical insurance that some employees may have through their collective bargaining agreement.

**Q. What is the difference between in-network care vs. out-of-network care?**

A. If you elect to use a health care provider out-of-network, you will be required to pay a deductible per year based on your coverage type. Usually there is no deductible or a significantly smaller deductible for in-network care. In addition, co-payments for out-of-network office visits and services are usually higher.

**Q. What is a primary care physician?**

A. A primary care physician (PCP) is considered a physician with a concentration in Internal Medicine, Family Practice, or Pediatrics. In an HMO, all care must be coordinated through your PCP.

**Q. What is the difference between an HMO and PPO?**

A. An HMO is a healthcare system that provides directly or arranges a comprehensive range of basic and supplemental health care services on a prepaid and fixed periodic basis. A PPO provides the flexibility of selecting in-network and out-of-network health care providers that provide a comprehensive range of services. The PPO provides a financial incentive for choosing in-network care.

**Q. Can I enroll in the health insurance plan at any time?**

A. No, you may enroll in the health insurance plan only during the benefits open enrollment period. However, if you have a qualifying event such as a status change, marriage, divorce, adoption, or birth, you may enroll within 31 days of that event.

**Q. Are my dependents automatically dropped from my insurance once they become overage for coverage?**

A. No. You are required to notify DCPS in writing, when your dependents become overaged. Your coverage will continue at a family rate and no refunds will be issued.

**Q. If my employment terminates, can I continue my health insurance coverage for my family and myself?**

A. Yes, you may continue coverage under Temporary Continuation of Coverage (TCC) for you and your dependents for at least 18 months, provided you were previously covered. TCC is also known as COBRA.

## Short/Long Term Disability Insurance

**Q. Am I automatically enrolled in the Short & Long Term Disability Plans?**

A. Participation in the plans are optional, you must enroll when first hired or during Open Enrollment.

**Q. Can I cancel Short/Long Term Disability at any time during the year?**

A. No, you can only cancel during Open Enrollment.

**Q. How do I submit a Short/Long Term Disability claim?**

A. Contact Standard Insurance company to file a claim.

## Flexible Spending Accounts

**Q. How do I know if either of the Flexible Spending Accounts is right for me?**

A. A flexible spending account is right for you if you have medical expenses that are not covered by your health insurance plan or you pay for a dependent care program. You can elect up to \$3,000 per year for healthcare expenses and up to \$5,000 per year for dependent care. The elected amounts are deducted from your paycheck in equal installments on a pre-tax basis.

**Q. What types of expenses are considered eligible for the healthcare account?**

A. A wide variety of items and services may be reimbursable. Examples of items include, but are not limited to: dental, vision, & hearing services, medications, co-payments, medically prescribed treatments, and smoking cessation programs. A detailed list of eligible expenses can be found online at [www.payflex.com](http://www.payflex.com).

**Q. What happens to the money in my account if I do not use it by the end of the calendar year?**

A. Under IRS regulations, you will forfeit any money that is unused at the end of the calendar year; therefor employees are encouraged to plan cautiously.

**Q. Does my FSA roll over each calendar year?**

A. No. You will need to complete FSA election forms during open enrollment for each year that you elect to participate.

## Life Insurance

**Q. Can I add or increase my life insurance coverage during the open enrollment period?**

A. No, opportunities to enroll in a life insurance option you previously declined are strictly limited and typically not offered during the open enrollment period. However, you can decrease your life insurance coverage at any time.

**Q. Can I change my beneficiary designations at any time or only during the open enrollment period?**

A. Changes to beneficiaries can be done at any time. It is recommended that you review and update your beneficiary designations in ESS following life events (ie. birth of child, marriage, divorce, etc).

**Q. Can I obtain life insurance coverage for my family members?**

A. Yes, you may purchase optional life to cover your spouse or children, but only during the open enrollment period for life insurance. However, if you have a qualifying event including, but not limited to, marriage, divorce, adoption or birth of a child, you may enroll within 31 days of that event.

**Q. If I terminate employment, can I take my current life insurance coverage with me?**

A. Yes, an employee can convert the group coverage policy into an individual whole life policy by completing a life insurance conversion form within 31 days of termination.

## Holidays

**Q. What are the paid holidays for District of Columbia Government Employees?**

- |   |                    |                    |
|---|--------------------|--------------------|
| ▪ New Year's Day                        | ▪ Memorial Day     | ▪ Veterans Day     |
| ▪ Martin Luther King, Jr. Birthday      | ▪ Independence Day | ▪ Thanksgiving Day |
| ▪ Presidents Day                        | ▪ Labor Day        | ▪ Christmas Day    |
| ▪ District of Columbia Emancipation Day | ▪ Columbus Day     |                    |

## Points of Contact

### Frequently Requested Phone Numbers & Email Addresses

#### DCPS Central Office

DCPS Office	Email/ Why Contact	Phone Number	Fax Number
Office of Human Resources	dcps.hranswers@dc.gov dcps.benefits@dc.gov	202.442.4090	202.442.5315
Payroll Office	<i>Paycheck errors, sick leave errors</i>	202.442.5300	202.442.5306
IT Help Desk	<i>ESS login issues, lost password</i>	202.727.8700	

#### Union Contact for Dental & Vision Plans

Union	Covered Employees	Member Services Contact
Council of School Officers	<ul style="list-style-type: none"> <li>Principals, Assistant Principals, ET Officers</li> </ul>	202-526-4700
Washington Teachers Union (WTU)	<ul style="list-style-type: none"> <li>ET Teachers &amp; Service Providers</li> <li>EG-09 Teachers</li> </ul>	202-293-8600 <a href="http://www.wtulocal6.org/Benefits/">http://www.wtulocal6.org/Benefits/</a>

#### Health Benefits

Provider	Website	Member Services Contact
Aetna Healthcare	<a href="http://www.aetna.com">www.aetna.com</a>	888.238.6258
Kaiser Permanente	<a href="http://www.kp.org">www.kp.org</a>	301.468.6000
United Healthcare HMO	<a href="http://www.myuhc.com">www.myuhc.com</a>	800.709.7604
United Healthcare POS	<a href="http://www.myuhc.com">www.myuhc.com</a>	800.815.8958

#### Life Insurance

Provider	Website	Group ID number
The Standard	<a href="http://www.standard.com">www.standard.com</a>	641332-B

#### Additional Benefits

Benefit Type	Administrator	Website/ Contact
Commuter Pre-Tax Benefit	ADP	<a href="http://www.flexdirect.adp.com">www.flexdirect.adp.com</a>
Flexible Spending	PayFlex	<a href="http://www.payflex.com">www.payflex.com</a> 800.284.4885
Short Term & Long Term Disability	The Standard	<a href="http://www.standard.com">www.standard.com</a>
Sports Club Discount	Washington Sports Clubs	Nancy Stitt 202.296.7733 <a href="mailto:nancy.stitt@town-sports.com">nancy.stitt@town-sports.com</a>

## Supporting Documentation FAX Coversheet

---

**FAX TO OHR-BENEFITS**

RE: Supporting Documentation for Benefits Enrollment

<b>Fax To:</b>	<b>202.442.5315</b>	<b># of Pages:</b>	
<b>Today's Date:</b>		<b>Date of Hire:</b>	
<b>From:</b> Print Name Clearly		<b>Social Security #:</b> Last 4 Only	XXX-XX-
<b>Contact Phone:</b>		<b>Alternate Phone:</b>	
<b>Email Address:</b>			

**NOTES:**

---